

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

ADDRESS (number and street) ▼

211 South Fifth Street

☐ Check if different than previously reported. (ACC)

Columbus

OH

43215

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00162339

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☒ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer CHAIRMAN RANAE LENTZ

Signature of Treasurer

CHAIRMAN RANAE LENTZ

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
01 / 01 / 2016 To: M M / D D / Y Y Y Y Y Y
01 / 31 / 2016

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2016		17934.24
(b) Cash on Hand at Beginning of Reporting Period.....	17934.24	
(c) Total Receipts (from Line 19)	224276.25	224276.25
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	242210.49	242210.49
7. Total Disbursements (from Line 31)	235420.60	235420.60
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	6789.89	6789.89
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	458915.68	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	1		0	1		2	0	1	6		

To:

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	1		3	1		2	0	1	6		

I. Receipts
COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

20140.00

20140.00

(ii) Unitemized

35477.65

35477.65

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ►

55617.65

55617.65

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

31126.00

31126.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ►

86743.65

86743.65

12. Transfers From Affiliated/Other

Party Committees.....

99620.00

99620.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

37912.60

37912.60

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

37912.60

37912.60

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c))..... ►

224276.25

224276.25

20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ►

186363.65

186363.65

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	31286.00	31286.00
(ii) Non-Federal Share.....	55619.60	55619.60
(b) Other Federal Operating Expenditures	57798.22	57798.22
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	144703.82	144703.82
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	90716.78	90716.78
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	90716.78	90716.78
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	235420.60	235420.60
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	179801.00	179801.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	86743.65	86743.65
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	86743.65	86743.65
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	89084.22	89084.22
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	89084.22	89084.22

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 90
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

Full Name (Last, First, Middle Initial)

A. MR. HERBERT HOPPE

Mailing Address 22701 LAKE RD.
APT. 515 A

City State Zip Code
ROCKY RIVER OH 44116-4501

FEC ID number of contributing
federal political committee.

C

Name of Employer
WALDHEGER-COYREE CO. LPA

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

01 / 06 / 2016

Transaction ID : SA11.1691383

Amount of Each Receipt this Period

125.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

B. CREIGHTON MURCH

Mailing Address 2280 TUDOR DR.

City State Zip Code
CLEVELAND OH 44106-3210

FEC ID number of contributing
federal political committee.

C

Name of Employer
M.H. MURCH CO, INC

Occupation
INVESTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

01 / 06 / 2016

Transaction ID : SA11.1691372

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

C. MR. PAUL R. PRICE

Mailing Address 828 BRUBAKER DR.

City State Zip Code
DAYTON OH 45429-3428

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

01 / 06 / 2016

Transaction ID : SA11.1691377

Amount of Each Receipt this Period

300.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

925.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

 FOR LINE NUMBER: PAGE 7 OF 90
 (check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

Full Name (Last, First, Middle Initial)

A. MR. GARY VAN GUNDY

Mailing Address 618 GREENMOUNT BLVD.

City	State	Zip Code
DAYTON	OH	45419-3271

FEC ID number of contributing federal political committee.

C

Name of Employer

DRT MFG CO

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	06	/	2016

Transaction ID : SA11.1691357

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

B. MARILYN ASHCRAFTMailing Address 621 VIRGINIA ST.
H 7

City	State	Zip Code
MARIETTA	OH	45750-2892

FEC ID number of contributing federal political committee.

C

Name of Employer

STATE OF OHIO

Occupation

REGIONAL REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	12	/	2016

Transaction ID : SA11.1691453

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

C. MR. JONATHAN DEVERMailing Address 255 E. 5TH ST.
STE. 1900

City	State	Zip Code
CINCINNATI	OH	45202-4720

FEC ID number of contributing federal political committee.

C

Name of Employer

SELF

Occupation

ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	13	/	2016

Transaction ID : SA11.1691471

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

2500.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

Full Name (Last, First, Middle Initial)

A. MR. MICHAEL MAY

Mailing Address 3304 RHODES AVE.
128

City State Zip Code
NEW BOSTON OH 45662-4914

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

01 / 13 / 2016

Transaction ID : SA11.1691455

Amount of Each Receipt this Period

350.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

B. KEN REEDER

Mailing Address 3810 MONETS LN.

City State Zip Code
CINCINNATI OH 45241-3864

FEC ID number of contributing
federal political committee.

C

Name of Employer

PAR EXCELLENCE SYSTEMS

Occupation

SOFTWARE DEVELOPER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

01 / 14 / 2016

Transaction ID : SA11.1691552

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

C. MR. KENNETH FIBUS

Mailing Address 42 REDFERN DR.

City State Zip Code
YOUNGSTOWN OH 44505-1663

FEC ID number of contributing
federal political committee.

C

Name of Employer

DINESOL PLASTICS INC.

Occupation

EXEC.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

01 / 18 / 2016

Transaction ID : SA11.1691572

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1100.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

Full Name (Last, First, Middle Initial)

A. MR. CARL SCHLOTMAN

Mailing Address 8551 NEW ENGLAND CT.

City	State	Zip Code
CINCINNATI	OH	45236-2093

FEC ID number of contributing
federal political committee.

C

Name of Employer

CAI INSURANCE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01	/	18	/	2016

Transaction ID : SA11.1691558

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

B. MR. ELLSWORTH HOLDEN

Mailing Address 26 NORTHWOOD DR.

City	State	Zip Code
ATHENS	OH	45701-1341

FEC ID number of contributing
federal political committee.

C

Name of Employer

OHIO UNIVERSITY

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01	/	19	/	2016

Transaction ID : SA11.1691595

Amount of Each Receipt this Period

1500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

C. MR. RICHARD HORVITZMailing Address 6095 PARKLAND BLVD.
STE. 300

City	State	Zip Code
CLEVELAND	OH	44124-6140

FEC ID number of contributing
federal political committee.

C

Name of Employer

MORELAND MANAGEMENT COMPANY

Occupation

INVESTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01	/	19	/	2016

Transaction ID : SA11.1691641

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2250.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 90

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

Full Name (Last, First, Middle Initial)

A. RONALD N. BROWN

Mailing Address 6330 N. RIVER RD.

City

WATERVILLE

State

OH

Zip Code

43566-9642

FEC ID number of contributing
federal political committee.

C

Name of Employer

TLC EYE CARE AND LASER CENTER

Occupation

OPHTHOMOLOGIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

 M M / D D / Y Y Y Y Y Y
 01 / 20 / 2016

Transaction ID : SA11.1691837

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

B. ELINOR MATCHNEERMailing Address 2229 TAYLOR PARK DR.
APT. 413

City

REYNOLDSBURG

State

OH

Zip Code

43068-7400

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED PER BEST
EFFORTS

Occupation

HOUSEWIFE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

 M M / D D / Y Y Y Y Y Y
 01 / 20 / 2016

Transaction ID : SA11.1691828

Amount of Each Receipt this Period

300.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

C. MR. RONALD FANNING

Mailing Address 422 MAGNOLIA ST.

City

CELINA

State

OH

Zip Code

45822-1254

FEC ID number of contributing
federal political committee.

C

Name of Employer

FANNING/HOWEY INC.

Occupation

ARCHITECTURE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

 M M / D D / Y Y Y Y Y Y
 01 / 21 / 2016

Transaction ID : SA11.1691935

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

1050.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

 FOR LINE NUMBER:
 (check only one)

PAGE 11 OF 90

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

Full Name (Last, First, Middle Initial)

A. MR. ARLAND STEIN

Mailing Address 4296 PRESERVATION AVE.

City	State	Zip Code
NEW ALBANY	OH	43054-5002

FEC ID number of contributing federal political committee.

C

 Name of Employer
 HAHN LOESER & PARKS

 Occupation
 LAWYER

Receipt For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	21	/	2016

Transaction ID : SA11.1691936

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

B. JACOB COHEN

Mailing Address 38480 FLADERS DR.

City	State	Zip Code
OLON	OH	44139-4670

FEC ID number of contributing federal political committee.

C

 Name of Employer
 TEAMHEALTH

 Occupation
 PHYSICIAN

Receipt For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	25	/	2016

Transaction ID : SA11.1692027

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

C. DIANNE L. COOPER

Mailing Address 11212 RD. 191

City	State	Zip Code
OAKWOOD	OH	45873-9345

FEC ID number of contributing federal political committee.

C

Name of Employer

INFORMATION REQUESTED PER BEST EFF

Occupation

INFORMATION REQUESTED PER BEST EFF

Receipt For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	25	/	2016

Transaction ID : SA11.1692114

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1000.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 12 OF 90
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

Full Name (Last, First, Middle Initial)

A. MR. HERBERT HOPPEMailing Address 22701 LAKE RD.
APT. 515 A

City	State	Zip Code
ROCKY RIVER	OH	44116-4501

FEC ID number of contributing
federal political committee.

C

Name of Employer
WALDHEGER-COYREE CO. LPAOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	25	/	2016

Transaction ID : SA11.1692086

Amount of Each Receipt this Period

125.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

B. MR. DONALD KLISE

Mailing Address 1008 GREENS VIEW DR.

City	State	Zip Code
WOOSTER	OH	44691-2660

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	25	/	2016

Transaction ID : SA11.1692021

Amount of Each Receipt this Period

240.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

C. RONALD SIBILA

Mailing Address P.O. BOX 20109

City	State	Zip Code
CANTON	OH	44701-0109

FEC ID number of contributing
federal political committee.

C

Name of Employer
PEOPLES CARTAGE INCOccupation
PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	25	/	2016

Transaction ID : SA11.1692060

Amount of Each Receipt this Period

700.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1065.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 OF 90

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

Full Name (Last, First, Middle Initial)

A. NORMAN CONRAD

Mailing Address 685 MELLWOOD DR.

City

NEW LEXINGTON

State

OH

Zip Code

43764-9405

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 26 / 2016

Transaction ID : SA11.1692150

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

B. JOHN DELANEY

Mailing Address 4731 PIN OAK RD.

City

AKRON

State

OH

Zip Code

44333-1070

FEC ID number of contributing
federal political committee.

C

Name of Employer

GDS EXPRESS

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 26 / 2016

Transaction ID : SA11.1692139

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

C. MR. THOMAS FLESCH

Mailing Address 595 CARDINAL HILL LN.

City

POWELL

State

OH

Zip Code

43065-8483

FEC ID number of contributing
federal political committee.

C

Name of Employer

GORDON FLESCH COMPANY

Occupation

CEO

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 27 / 2016

Transaction ID : SA11.1692190

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

6500.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

 FOR LINE NUMBER: PAGE 14 OF 90
 (check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

Full Name (Last, First, Middle Initial)

A. LARRY J. HOTCHKISS

Mailing Address 1241 DUBLIN RD.

City

COLUMBUS

State

OH

Zip Code

43215-7048

FEC ID number of contributing
federal political committee.

C

Name of Employer

LARRY HOTCHKISS ATTORNEY AT LAW

Occupation

ATTORNEY

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	7		2	0	1	6

Transaction ID : SA11.1692170

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

B. MR. ALAN A. RIGLING

Mailing Address 2128 HAMILTON RICHMOND RD.

City

HAMILTON

State

OH

Zip Code

45013-1018

FEC ID number of contributing
federal political committee.

C

Name of Employer

NEW MIAMI BOARD OF ED.

Occupation

TEACHER

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	7		2	0	1	6

Transaction ID : SA11.1692203

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

C. JOHN MCGOUGH

Mailing Address 329 SAFREED WAY

City

POWELL

State

OH

Zip Code

43065-8062

FEC ID number of contributing
federal political committee.

C

Name of Employer

MCGOAH

Occupation

CONSULTANT

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	8		2	0	1	6

Transaction ID : SA11.1692268

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶

3500.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 OF 90
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

<p>A. MR. RICHARD WEILAND</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 2444 MADISON RD. UNIT 1406</p> <p>City CINCINNATI State OH Zip Code 45208-1277</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer RICHARD CONSULTING Occupation CONSULTANT</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p> <p>Aggregate Year-to-Date ▼ 250.00 </p>	<p>Date of Receipt 01 / 28 / 2016 </p> <p>Transaction ID : SA11.1692257</p> <p>Amount of Each Receipt this Period 250.00 </p> <p>CONTRIBUTION</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address</p> <p>City State Zip Code</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p> <p>Aggregate Year-to-Date ▼ </p>	<p>Date of Receipt / / </p> <p>Amount of Each Receipt this Period </p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address</p> <p>City State Zip Code</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p> <p>Aggregate Year-to-Date ▼ </p>	<p>Date of Receipt / / </p> <p>Amount of Each Receipt this Period </p>
<p>SUBTOTAL of Receipts This Page (optional)..... ►</p> <p>TOTAL This Period (last page this line number only)..... ►</p>	
<div style="border: 1px solid black; padding: 5px; display: inline-block;">250.00</div> <div style="border: 1px solid black; padding: 5px; display: inline-block;">20140.00</div>	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 16 OF 90

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

Full Name (Last, First, Middle Initial)

A. JIM RENACCI FOR CONGRESS

Mailing Address 150 SMOKERISE DR.

City

WADSWORTH

State

OH

Zip Code

44281-8701

FEC ID number of contributing
federal political committee.

C

C00466359

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

26126.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01	/	15	/	2016

Transaction ID : SA11.1691554

Amount of Each Receipt this Period

26126.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

B. AMERICAS FUTURE FUND PAC

Mailing Address 150 SMOKERISE DR.

City

WADSWORTH

State

OH

Zip Code

44281-8701

FEC ID number of contributing
federal political committee.

C

C00494757

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01	/	15	/	2016

Transaction ID : SA11.1691555

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y
	/		/	

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

31126.00

TOTAL This Period (last page this line number only)..... ►

31126.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 17 OF 90

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

Full Name (Last, First, Middle Initial)

A. Republican National Committee

Mailing Address 310 First St. SE

City

Washington

State

DC

Zip Code

20003

FEC ID number of contributing
federal political committee.

C C00003418

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
01	/	04	/	2016

Transaction ID : SchA.1

Amount of Each Receipt this Period

99620.00

Transfer

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
	/		/	

Amount of Each Receipt this Period

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
	/		/	

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

99620.00

99620.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 18 OF 90

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

Full Name (Last, First, Middle Initial)

A. HUNTINGTON NATIONAL BANK- MAIN

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		01		2016

Mailing Address 41 S. HIGH STREET, HC0642

City	State	Zip Code
COLUMBUS	OH	43215

Transaction ID : SB21B.I6362Purpose of Disbursement
BANK FEE

001

Amount of Each Disbursement this Period

Candidate Name

939.53

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
-------------------	---

Full Name (Last, First, Middle Initial)

B. HUNTINGTON NATIONAL BANK- MAIN

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		04		2016

Mailing Address 41 S. HIGH STREET, HC0642

City	State	Zip Code
COLUMBUS	OH	43215

Transaction ID : SB21B.I6258Purpose of Disbursement
BANK FEE

001

Amount of Each Disbursement this Period

Candidate Name

40.85

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
-------------------	---

Full Name (Last, First, Middle Initial)

C. MDI IMAGING & MAIL

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		04		2016

Mailing Address ATTN: JAY HARTMAN
21955 CASCADES PKWY

City	State	Zip Code
STERLING	VA	20166

Transaction ID : SB21B.I6243Purpose of Disbursement
DIRECT MAIL COSTS

001

Amount of Each Disbursement this Period

Candidate Name

4590.00

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
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SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5570.38

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 19 OF 90

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

Full Name (Last, First, Middle Initial)

A. JUSTIN BIS

Mailing Address C/O 211 S. FIFTH ST.

City COLUMBUS State OH Zip Code 43215

Purpose of Disbursement
REIMBURSEMENT- SEE JB 12/30- NOT CANDIDATE SPECIFIC

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 05 / 2016
Transaction ID : SB21B.I6178

Amount of Each Disbursement this Period

75.00

Full Name (Last, First, Middle Initial)

B. SPRINT

Mailing Address PO BOX 4191

City CAROL STREAM State IL Zip Code 60197

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 05 / 2016
Transaction ID : SB21B.I6217

Amount of Each Disbursement this Period

75.00

[MEMO ITEM]

BW 1/16-CELL PHONE- NOT CANDIDATE SPECIFIC

Full Name (Last, First, Middle Initial)

C. UNITED HEALTH CARE INSURANCE
Mailing Address COMPANY OF THE RIVER VALLEY
22070 NETWORK PL

City CHICAGO State IL Zip Code 60673-1220

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 06 / 2016
Transaction ID : SB21B.I6252

Amount of Each Disbursement this Period

1399.96

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1474.96

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 20 OF 90

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

Full Name (Last, First, Middle Initial)

A. ZACHARY BARNES

Mailing Address C/O 211 S. FIFTH ST.

City COLUMBUS State OH Zip Code 43215

Purpose of Disbursement
ZB 1/16- MILEAGE REIMBURSEMENT- NOT CANDIDATE SPECIFIC

001

Candidate Name

Category/
Type
Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 11 / 2016
Transaction ID : SB21B.I6192

Amount of Each Disbursement this Period

80.00

Full Name (Last, First, Middle Initial)

B. ZACHARY BARNES

Mailing Address C/O 211 S. FIFTH ST.

City COLUMBUS State OH Zip Code 43215

Purpose of Disbursement
REIMBURSEMENT- SEE ZB 1/16-NOT CANDIDATE SPECIFIC

001

Candidate Name

Category/
Type
Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 11 / 2016
Transaction ID : SB21B.I6193

Amount of Each Disbursement this Period

89.61

Full Name (Last, First, Middle Initial)

C. MATTHEW BORGES

Mailing Address 95 DAY CT

City WESTERVILLE State OH Zip Code 43081

Purpose of Disbursement
POLITICAL CONSULTING-NOT CANDIDATE SPECIFIC

001

Candidate Name

Category/
Type
Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 11 / 2016
Transaction ID : SB21B.I6245

Amount of Each Disbursement this Period

6538.40

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

6708.01

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 21 OF 90

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

Full Name (Last, First, Middle Initial)

A. DANIEL BOWER

Date of Disbursement

M	M		D	D		Y	Y	Y	Y	Y	Y
0	1		1	1		2	0	1	6		

Mailing Address C/O 211 S. FIFTH ST.

City	State	Zip Code
COLUMBUS	OH	43215

Transaction ID : SB21B.I6203

Purpose of Disbursement
DB 1/16- MILEAGE REIMBURSEMENT- NOT CANDIDATE SPECIFIC

001

Amount of Each Disbursement this Period

Candidate Name

2	8	2	.	2	4
---	---	---	---	---	---

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

B. DANIEL BOWER

Date of Disbursement

M	M		D	D		Y	Y	Y	Y	Y	Y
0	1		1	1		2	0	1	6		

Mailing Address C/O 211 S. FIFTH ST.

City	State	Zip Code
COLUMBUS	OH	43215

Transaction ID : SB21B.I6204

Purpose of Disbursement
REIMBURSEMENT- SEE DB 1/16- NOT CANDIDATE SPECIFIC

--

Amount of Each Disbursement this Period

Candidate Name

5	6	.	7	1
---	---	---	---	---

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

C. LES DAVIES

Date of Disbursement

M	M		D	D		Y	Y	Y	Y	Y	Y
0	1		1	1		2	0	1	6		

Mailing Address C/O 211 S. FIFTH ST.

City	State	Zip Code
COLUMBUS	OH	43215

Transaction ID : SB21B.I6225

Purpose of Disbursement
LD 1/16-MILEAGE REIMBURSEMENT- NOT CANDIDATE SPECIFIC

001

Amount of Each Disbursement this Period

Candidate Name

1	1	7	.	2	0
---	---	---	---	---	---

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

SUBTOTAL of Disbursements This Page (optional)..... ►

4	5	6	.	1	5
---	---	---	---	---	---

TOTAL This Period (last page this line number only)..... ►

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

Full Name (Last, First, Middle Initial)

A. LES DAVIES

Mailing Address C/O 211 S. FIFTH ST.

City COLUMBUS State OH Zip Code 43215

Purpose of Disbursement
REIMBURSEMENT- SEE LD 1/16- NOT CANDIDATE SPECIFIC

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 11 / 2016
Transaction ID : SB21B.I6226

Amount of Each Disbursement this Period

80.01

Full Name (Last, First, Middle Initial)

B. ELIZABETH GOINS

Mailing Address C/O 211 S. FIFTH ST.

City COLUMBUS State OH Zip Code 43215

Purpose of Disbursement
EG 1/16- MILEAGE REIMBURSEMENT- NOT CANDIDATE SPECIFIC

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 11 / 2016
Transaction ID : SB21B.I6206

Amount of Each Disbursement this Period

77.60

Full Name (Last, First, Middle Initial)

C. ELIZABETH GOINS

Mailing Address C/O 211 S. FIFTH ST.

City COLUMBUS State OH Zip Code 43215

Purpose of Disbursement
REIMBURSEMENT- SEE EG 1/16- NOT CANDIDATE SPECIFIC

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 11 / 2016
Transaction ID : SB21B.I6207

Amount of Each Disbursement this Period

145.81

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

303.42

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 23 OF 90

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

Full Name (Last, First, Middle Initial)

A. TODD KRUECKEBERG

Mailing Address C/O 211 S. FIFTH ST.

City COLUMBUS State OH Zip Code 43215

Purpose of Disbursement
TK 1/16-MILEAGE REIMBURSEMENT- NOT CANDIDATE SPECIFIC

001

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 11 / 2016
Transaction ID : SB21B.I6222

Amount of Each Disbursement this Period

23.23

Full Name (Last, First, Middle Initial)

B. TODD KRUECKEBERG

Mailing Address C/O 211 S. FIFTH ST.

City COLUMBUS State OH Zip Code 43215

Purpose of Disbursement
REIMBURSEMENT- SEE TK 1/16- NOT CANDIDATE SPECIFIC

001

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 11 / 2016
Transaction ID : SB21B.I6223

Amount of Each Disbursement this Period

45.57

Full Name (Last, First, Middle Initial)

C. SCOTT MORGAN

Mailing Address C/O 211 S. FIFTH ST.

City COLUMBUS State OH Zip Code 43215

Purpose of Disbursement
REIMBURSEMENT- SEE SM 1/16-NOT CANDIDATE SPECIFIC

001

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 11 / 2016
Transaction ID : SB21B.I6221

Amount of Each Disbursement this Period

94.65

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

163.45

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

A. DEBORAH PETTIT

00:

267.04

Category/
Type

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

B. DEBORAH PETTIT

MM / DD / YYYY
01 / 11 / 2016

00

75.00

Category/
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

C. CHRISTOPHER VELAZCO

The image shows three 3x3 grids, each representing a number. The first grid shows the number 01, the second shows 11, and the third shows 2016. Each grid is composed of a 3x3 array of dots, with some dots filled in to represent the digits. The first grid has dots at (1,1), (1,3), (2,2), and (3,2). The second grid has dots at (1,1), (1,3), (2,2), and (3,2). The third grid has dots at (1,1), (1,3), (2,2), (3,2), (4,1), (4,3), (5,2), and (5,4).

00'

Age Group	Percentage
18-24	18.64
25-34	18.64
35-44	18.64
45-54	18.64
55-64	18.64
65-74	18.64
75-84	18.64
85+	18.64

Category/
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

360.68

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 25 OF 90

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

Full Name (Last, First, Middle Initial)

A. CHRISTOPHER VELAZCO

Mailing Address C/O 211 S. FIFTH ST.

City COLUMBUS State OH Zip Code 43215

Purpose of Disbursement
REIMBURSEMENT- SEE CV 1/16-NOT CANDIDATE SPECIFIC

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
01 / 11 / 2016
Transaction ID : SB21B.I6201

Amount of Each Disbursement this Period

75.00

Full Name (Last, First, Middle Initial)

B. DAVID WARREN

Mailing Address C/O 211 S. FIFTH ST.

City COLUMBUS State OH Zip Code 43215

Purpose of Disbursement
DW 1/16- MILEAGE REIMBURSEMENT- NOT CANDIDATE SPECIFIC

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
01 / 11 / 2016
Transaction ID : SB21B.I6180

Amount of Each Disbursement this Period

330.80

Full Name (Last, First, Middle Initial)

C. BRANDI WIELGOPOLSKI

Mailing Address C/O 211 S. FIFTH ST.

City COLUMBUS State OH Zip Code 43215

Purpose of Disbursement
REIMBURSEMENT- SEE BW 1/16- NOT CANDIDATE SPECIFIC

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
01 / 11 / 2016
Transaction ID : SB21B.I6216

Amount of Each Disbursement this Period

75.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

480.80

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

Full Name (Last, First, Middle Initial)

A. CORY ZIMMERMAN

Mailing Address C/O 211 S. FIFTH ST.

City State Zip Code
COLUMBUS OH 43215Purpose of Disbursement
CZ 1/16-MILEAGE REIMBURSEMENT- NOT CANDIDATE SPECIFIC

001

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
01 11 2016

Transaction ID : SB21B.I6235

Amount of Each Disbursement this Period

177.60

Full Name (Last, First, Middle Initial)

B. CORY ZIMMERMAN

Mailing Address C/O 211 S. FIFTH ST.

City State Zip Code
COLUMBUS OH 43215Purpose of Disbursement
REIMBURSEMENT- SEE CZ 1/16- NOT CANDIDATE SPECIFIC

001

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
01 11 2016

Transaction ID : SB21B.I6236

Amount of Each Disbursement this Period

75.00

Full Name (Last, First, Middle Initial)

C. AT&T-FAX

Mailing Address PO BOX 8100

City State Zip Code
AURORA IL 60507

Purpose of Disbursement

001

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
01 11 2016

Transaction ID : SB21B.I6238

Amount of Each Disbursement this Period

47.74

[MEMO ITEM]

LD 1/16- CELL PHONE-NOT CANDIDATE SPECIFIC

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

252.60

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

A. UNITED HEALTH CARE- LIFE

Date of Disbursement

Transaction ID : SB21B.I6244

001

Category/
Type

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Amount of Each Disbursement this Period

B. FEDERAL ELECTION COMMISSION (FEC)

Date of Disbursement

M M / D D / Y Y Y Y
01 14 2016

Transaction ID : SB21B.I6241

001

Category/
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Amount of Each Disbursement this Period

3000.00

C. KATHLEEN EAGAN

Date of Disbursement



Transaction ID : SB21B.I6303

001

Category/
Type

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Amount of Each Disbursement this Period

5396.48

8508.98

8508.98

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

Full Name (Last, First, Middle Initial)

A. BRITTANY WARNER

Mailing Address C/O 211 S. FIFTH ST.

City COLUMBUS State OH Zip Code 43215

Purpose of Disbursement
PAYROLL, TAXES & FEES-NOT CANDIDATE SPECIFIC

001

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 15 / 2016
Transaction ID : SB21B.I6322

Amount of Each Disbursement this Period

3447.51

Full Name (Last, First, Middle Initial)

B. FIRST FEDERAL BANK

Mailing Address PO BOX 31021

City TAMPA State FL Zip Code 33631-3021

Purpose of Disbursement
CREDIT CARD PAYMENT

001

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 15 / 2016
Transaction ID : SB21B.I6242

Amount of Each Disbursement this Period

3000.00

Full Name (Last, First, Middle Initial)

C. US POSTMASTER-GENERIC

Mailing Address 2323 CITYGATE DR.

City COLUMBUS State OH Zip Code 43218

Purpose of Disbursement
POSTAGE- NOT CANDIDATE SPECIFIC

001

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 15 / 2016
Transaction ID : SB21B.I6250

Amount of Each Disbursement this Period

245.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

6692.51

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

A. ELAINE HERRICK

City	State	Zip Code
COLUMBUS	OH	43215

Transaction ID : SB21B.I6181

Purpose of Disbursement	EH 1/16-MILEAGE REIMBURSEMENT- NOT CANDIDATE SPECIFIC
-------------------------	---

00:

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

209.60

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

B. ELAINE HERRICK

M M / D D / Y Y Y Y
01 20 2016

Mailing Address C/O 211 S. FIFTH ST.

City	State	Zip Code
COLUMBUS	OH	43215

Transaction ID : SB21B.I6182

Purpose of Disbursement	REIMBURSEMENT- SEE EH 1/16-NOT CANDIDATE SPECIFIC
-------------------------	---

00

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

217.32

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

State: District:

C. JEFFREY PASTOR

Mailing Address C/O 211 S. FIFTH ST.

City	State	Zip Code
COLUMBUS	OH	43215

Transaction ID : SB21B.I6186

Purpose of Disbursement	JP 1/16- MILEAGE REIMBURSEMENT- NOT CANDIDATE SPECIFIC
-------------------------	--

00'

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

43.12

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional).....

470.04

TOTAL This Period (last page this line number only).....

	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64	65	66	67	68	69	70	71	72	73	74	75	76	77	78	79	80	81	82	83	84	85	86	87	88	89	90	91	92	93	94	95	96	97	98	99	100	101	102	103	104	105	106	107	108	109	110	111	112	113	114	115	116	117	118	119	120	121	122	123	124	125	126	127	128	129	130	131	132	133	134	135	136	137	138	139	140	141	142	143	144	145	146	147	148	149	150	151	152	153	154	155	156	157	158	159	160	161	162	163	164	165	166	167	168	169	170	171	172	173	174	175	176	177	178	179	180	181	182	183	184	185	186	187	188	189	190	191	192	193	194	195	196	197	198	199	200	201	202	203	204	205	206	207	208	209	210	211	212	213	214	215	216	217	218	219	220	221	222	223	224	225	226	227	228	229	230	231	232	233	234	235	236	237	238	239	240	241	242	243	244	245	246	247	248	249	250	251	252	253	254	255	256	257	258	259	260	261	262	263	264	265	266	267	268	269	270	271	272	273	274	275	276	277	278	279	280	281	282	283	284	285	286	287	288	289	290	291	292	293	294	295	296	297	298	299	300	301	302	303	304	305	306	307	308	309	310	311	312	313	314	315	316	317	318	319	320	321	322	323	324	325	326	327	328	329	330	331	332	333	334	335	336	337	338	339	340	341	342	343	344	345	346	347	348	349	350	351	352	353	354	355	356	357	358	359	360	361	362	363	364	365	366	367	368	369	370	371	372	373	374	375	376	377	378	379	380	381	382	383	384	385	386	387	388	389	390	391	392	393	394	395	396	397	398	399	400	401	402	403	404	405	406	407	408	409	410	411	412	413	414	415	416	417	418	419	420	421	422	423	424	425	426	427	428	429	430	431	432	433	434	435	436	437	438	439	440	441	442	443	444	445	446	447	448	449	450	451	452	453	454	455	456	457	458	459	460	461	462	463	464	465	466	467	468	469	470	471	472	473	474	475	476	477	478	479	480	481	482	483	484	485	486	487	488	489	490	491	492	493	494	495	496	497	498	499	500	501	502	503	504	505	506	507	508	509	510	511	512	513	514	515	516	517	518	519	520	521	522	523	52
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 30 OF 90

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

Full Name (Last, First, Middle Initial)

A. JEFFREY PASTOR

Mailing Address C/O 211 S. FIFTH ST.

City COLUMBUS State OH Zip Code 43215

Purpose of Disbursement
REIMBURSEMENT- SEE JP 1/16 NOT CANDIDATE SPECIFIC

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 20 / 2016
Transaction ID : SB21B.I6187

Amount of Each Disbursement this Period

312.23

Full Name (Last, First, Middle Initial)

B. BRANDON ZANON

Mailing Address C/O 211 S. FIFTH ST.

City COLUMBUS State OH Zip Code 43215

Purpose of Disbursement
BZ 1/16- MILEAGE REIMBURSEMENT- NOT CANDIDATE SPECIFIC

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 20 / 2016
Transaction ID : SB21B.I6212

Amount of Each Disbursement this Period

200.40

Full Name (Last, First, Middle Initial)

C. BRANDON ZANON

Mailing Address C/O 211 S. FIFTH ST.

City COLUMBUS State OH Zip Code 43215

Purpose of Disbursement
REIMBURSEMENT- SEE BZ 1/16-NOT CANDIDATE SPECIFIC

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 20 / 2016
Transaction ID : SB21B.I6213

Amount of Each Disbursement this Period

146.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

658.63

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 32 OF 90

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

Full Name (Last, First, Middle Initial)

A. MATTHEW BORGES

Mailing Address 95 DAY CT

City WESTERVILLE State OH Zip Code 43081

Purpose of Disbursement
REIMBURSEMENT-SEE MB 1/16-NOT CANDIDATE SPECIFIC

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 25 2016
Transaction ID : SB21B.I6247

Amount of Each Disbursement this Period

669.02

Full Name (Last, First, Middle Initial)

B. CHARLESTON PLACE HOTEL

Mailing Address 205 MEETING ST.

City CHARLESTON State SC Zip Code 29401

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 25 2016
Transaction ID : SB21B.I6248

Amount of Each Disbursement this Period

669.92

[MEMO ITEM]

MB 1/16-HOTEL RNC MEETING- NOT CANDIDATE SPECIFIC

Full Name (Last, First, Middle Initial)

C. STATE TREASURER OF OHIO

Mailing Address 30 E. BROAD STREET - 9TH FLOOR

City COLUMBUS State OH Zip Code 43215

Purpose of Disbursement
FEDERAL UNEMPLOYMENT TAX ASSESSMENT

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 25 2016
Transaction ID : SB21B.I6268

Amount of Each Disbursement this Period

4412.74

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5081.76

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

A. HUNTINGTON NATIONAL BANK- MAIN

Category/
Type

35.00

State: District:

B. MATTHEW BORGES

01 / 29 / 2016

Category/
Type

6538.40

State: District:

C. KATHLEEN EAGAN

Category/
Type

4808.00

State: District:

11381.40

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

A. BRITTANY WARNER

00:

3457.34

Category/
Type

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Full Name (Last, First, Middle Initial)

B. AABLE RENTS

01 / 29 / 2016

00

897.71

Category/
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Full Name (Last, First, Middle Initial)

C. HUGHIE'S

The image shows three 3x3 grids, each representing a number. The first grid shows '01' with 'M' in the top-left and top-right cells. The second grid shows '29' with 'D' in the top-left and top-right cells. The third grid shows '2016' with 'Y' in the top-left, top-middle, top-right, and middle-right cells.

00-

1364.40

Category/
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional).....

5719.45

TOTAL This Period (last page this line number only).....

57798.22

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 35 OF 90

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

Full Name (Last, First, Middle Initial)

A. BRIAN BARNES

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		15		2016

Mailing Address C/O 211 S. FIFTH ST.

City	State	Zip Code
COLUMBUS	OH	43215

Transaction ID : SB30B.I6294Purpose of Disbursement
PAYROLL, TAXES & FEES-NOT CANDIDATE SPECIFIC

001

Amount of Each Disbursement this Period

Candidate Name

2588.74

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

B. ZACHARY BARNES

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		15		2016

Mailing Address C/O 211 S. FIFTH ST.

City	State	Zip Code
COLUMBUS	OH	43215

Transaction ID : SB30B.I6295Purpose of Disbursement
PAYROLL, TAXES & FEES-NOT CANDIDATE SPECIFIC

001

Amount of Each Disbursement this Period

Candidate Name

1298.00

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

C. JOHN BERRIS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		15		2016

Mailing Address C/O 211 S. FIFTH ST.

City	State	Zip Code
COLUMBUS	OH	43215

Transaction ID : SB30B.I6296Purpose of Disbursement
PAYROLL, TAXES & FEES-NOT CANDIDATE SPECIFIC

001

Amount of Each Disbursement this Period

Candidate Name

523.87

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4410.61

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 36 OF 90

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

Full Name (Last, First, Middle Initial)

A. JUSTIN BIS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		15		2016

Mailing Address C/O 211 S. FIFTH ST.

City	State	Zip Code
COLUMBUS	OH	43215

Transaction ID : SB30B.I6297Purpose of Disbursement
PAYROLL, TAXES & FEES-NOT CANDIDATE SPECIFIC

001

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

2157.27

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

B. DANIEL BOWER

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		15		2016

Mailing Address C/O 211 S. FIFTH ST.

City	State	Zip Code
COLUMBUS	OH	43215

Transaction ID : SB30B.I6298Purpose of Disbursement
PAYROLL, TAXES & FEES-NOT CANDIDATE SPECIFIC

001

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

1856.85

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

C. BLAIR CATHCART

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		15		2016

Mailing Address C/O 211 S. FIFTH ST.

City	State	Zip Code
COLUMBUS	OH	43215

Transaction ID : SB30B.I6299Purpose of Disbursement
PAYROLL, TAXES & FEES-NOT CANDIDATE SPECIFIC

001

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

2799.07

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

6813.19

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

Full Name (Last, First, Middle Initial)

A. LARA CROTTY

Mailing Address C/O 211 S. FIFTH ST.

City	State	Zip Code
COLUMBUS	OH	43215

Purpose of Disbursement
PAYROLL, TAXES & FEES-NOT CANDIDATE SPECIFIC

001

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		15		2016

Transaction ID : SB30B.I6300

Amount of Each Disbursement this Period

3100.41

Full Name (Last, First, Middle Initial)

B. LES DAVIES

Mailing Address C/O 211 S. FIFTH ST.

City	State	Zip Code
COLUMBUS	OH	43215

Purpose of Disbursement
PAYROLL, TAXES & FEES-NOT CANDIDATE SPECIFIC

001

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		15		2016

Transaction ID : SB30B.I6301

Amount of Each Disbursement this Period

1851.20

Full Name (Last, First, Middle Initial)

C. ELIZABETH GOINS

Mailing Address C/O 211 S. FIFTH ST.

City	State	Zip Code
COLUMBUS	OH	43215

Purpose of Disbursement
PAYROLL, TAXES & FEES-NOT CANDIDATE SPECIFIC

001

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		15		2016

Transaction ID : SB30B.I6360

Amount of Each Disbursement this Period

1298.45

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

6250.06

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

Full Name (Last, First, Middle Initial)

A. TANNER HALE

Mailing Address C/O 211 S. FIFTH ST.

City	State	Zip Code
COLUMBUS	OH	43215

Purpose of Disbursement
PAYROLL, TAXES & FEES-NOT CANDIDATE SPECIFIC

001

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		15		2016

Transaction ID : SB30B.I6305

Amount of Each Disbursement this Period

523.86

Full Name (Last, First, Middle Initial)

B. ELAINE HERRICK

Mailing Address C/O 211 S. FIFTH ST.

City	State	Zip Code
COLUMBUS	OH	43215

Purpose of Disbursement
PAYROLL, TAXES & FEES-NOT CANDIDATE SPECIFIC

001

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		15		2016

Transaction ID : SB30B.I6307

Amount of Each Disbursement this Period

1619.87

Full Name (Last, First, Middle Initial)

C. TODD KRUECKEBERG

Mailing Address C/O 211 S. FIFTH ST.

City	State	Zip Code
COLUMBUS	OH	43215

Purpose of Disbursement
PAYROLL, TAXES & FEES-NOT CANDIDATE SPECIFIC

001

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		15		2016

Transaction ID : SB30B.I6308

Amount of Each Disbursement this Period

1298.45

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3442.18

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 39 OF 90

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

Full Name (Last, First, Middle Initial)

A. SCOTT MORGAN

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		15		2016

Mailing Address C/O 211 S. FIFTH ST.

City	State	Zip Code
COLUMBUS	OH	43215

Transaction ID : SB30B.I6309Purpose of Disbursement
PAYROLL, TAXES & FEES-NOT CANDIDATE SPECIFIC

001

Amount of Each Disbursement this Period

Candidate Name

1298.44

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

B. JEFFREY PASTOR

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		15		2016

Mailing Address C/O 211 S. FIFTH ST.

City	State	Zip Code
COLUMBUS	OH	43215

Transaction ID : SB30B.I6310Purpose of Disbursement
PAYROLL, TAXES & FEES-NOT CANDIDATE SPECIFIC

001

Amount of Each Disbursement this Period

Candidate Name

2575.01

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

C. DEBORAH PETTIT

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		15		2016

Mailing Address C/O 211 S. FIFTH ST.

City	State	Zip Code
COLUMBUS	OH	43215

Transaction ID : SB30B.I6311Purpose of Disbursement
PAYROLL, TAXES & FEES-NOT CANDIDATE SPECIFIC

001

Amount of Each Disbursement this Period

Candidate Name

1629.81

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5503.26

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 40 OF 90

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

Full Name (Last, First, Middle Initial)

A. SAMANTHA POLLOCK

Mailing Address C/O 211 S. FIFTH ST.

City	State	Zip Code
COLUMBUS	OH	43215

Purpose of Disbursement
PAYROLL, TAXES & FEES-NOT CANDIDATE SPECIFIC

001

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		15		2016

Transaction ID : SB30B.I6312

Amount of Each Disbursement this Period

1183.96

Full Name (Last, First, Middle Initial)

B. KAMILAH PRINCE

Mailing Address C/O 211 S. FIFTH ST.

City	State	Zip Code
COLUMBUS	OH	43215

Purpose of Disbursement
PAYROLL, TAXES & FEES-NOT CANDIDATE SPECIFIC

001

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		15		2016

Transaction ID : SB30B.I6313

Amount of Each Disbursement this Period

2600.69

Full Name (Last, First, Middle Initial)

C. ADAM RAPIEN

Mailing Address C/O 211 S. FIFTH ST.

City	State	Zip Code
COLUMBUS	OH	43215

Purpose of Disbursement
PAYROLL, TAXES & FEES-NOT CANDIDATE SPECIFIC

001

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		15		2016

Transaction ID : SB30B.I6314

Amount of Each Disbursement this Period

287.19

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4071.84

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 41 OF 90

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

Full Name (Last, First, Middle Initial)

A. SCOTT SANTAMARIA

Mailing Address C/O 211 S. FIFTH ST.

City	State	Zip Code
COLUMBUS	OH	43215

Purpose of Disbursement
PAYROLL, TAXES & FEES-NOT CANDIDATE SPECIFIC

001

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	15	/	2016

Transaction ID : SB30B.I6316

Amount of Each Disbursement this Period

2372.76

Full Name (Last, First, Middle Initial)

B. CHRISTOPHER VELAZCO

Mailing Address C/O 211 S. FIFTH ST.

City	State	Zip Code
COLUMBUS	OH	43215

Purpose of Disbursement
PAYROLL, TAXES & FEES-NOT CANDIDATE SPECIFIC

001

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	15	/	2016

Transaction ID : SB30B.I6319

Amount of Each Disbursement this Period

2123.43

Full Name (Last, First, Middle Initial)

C. MIRANDA WADE

Mailing Address C/O 211 S. FIFTH ST.

City	State	Zip Code
COLUMBUS	OH	43215

Purpose of Disbursement
PAYROLL, TAXES & FEES-NOT CANDIDATE SPECIFIC

001

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	15	/	2016

Transaction ID : SB30B.I6320

Amount of Each Disbursement this Period

1942.68

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

6438.87

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

Full Name (Last, First, Middle Initial)

A. DAVID WARREN

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		15		2016

Mailing Address C/O 211 S. FIFTH ST.

City	State	Zip Code
COLUMBUS	OH	43215

Transaction ID : SB30B.I6323Purpose of Disbursement
PAYROLL, TAXES & FEES-NOT CANDIDATE SPECIFIC

001

Amount of Each Disbursement this Period

Candidate Name

1727.18

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

B. BRANDI WIELGOPOLSKI

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		15		2016

Mailing Address C/O 211 S. FIFTH ST.

City	State	Zip Code
COLUMBUS	OH	43215

Transaction ID : SB30B.I6324Purpose of Disbursement
PAYROLL, TAXES & FEES-NOT CANDIDATE SPECIFIC

001

Amount of Each Disbursement this Period

Candidate Name

1727.19

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

C. LINDSEY WORKMAN

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		15		2016

Mailing Address C/O 211 S. FIFTH ST.

City	State	Zip Code
COLUMBUS	OH	43215

Transaction ID : SB30B.I6325Purpose of Disbursement
PAYROLL, TAXES & FEES-NOT CANDIDATE SPECIFIC

001

Amount of Each Disbursement this Period

Candidate Name

1298.00

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4752.37

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 43 OF 90

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

Full Name (Last, First, Middle Initial)

A. BRANDON ZANON

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		15		2016

Mailing Address C/O 211 S. FIFTH ST.

City	State	Zip Code
COLUMBUS	OH	43215

Transaction ID : SB30B.I6326Purpose of Disbursement
PAYROLL, TAXES & FEES-NOT CANDIDATE SPECIFIC

001

Amount of Each Disbursement this Period

Candidate Name

1619.88

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

B. CORY ZIMMERMAN

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		15		2016

Mailing Address C/O 211 S. FIFTH ST.

City	State	Zip Code
COLUMBUS	OH	43215

Transaction ID : SB30B.I6327Purpose of Disbursement
PAYROLL, TAXES & FEES-NOT CANDIDATE SPECIFIC

001

Amount of Each Disbursement this Period

Candidate Name

1298.00

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

C. BRIAN BARNES

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		29		2016

Mailing Address C/O 211 S. FIFTH ST.

City	State	Zip Code
COLUMBUS	OH	43215

Transaction ID : SB30B.I6328Purpose of Disbursement
PAYROLL, TAXES & FEES-NOT CANDIDATE SPECIFIC

001

Amount of Each Disbursement this Period

Candidate Name

2599.43

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5517.31

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 44 OF 90

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

Full Name (Last, First, Middle Initial)

A. ZACHARY BARNES

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		29		2016

Mailing Address C/O 211 S. FIFTH ST.

City	State	Zip Code
COLUMBUS	OH	43215

Transaction ID : SB30B.I6329Purpose of Disbursement
PAYROLL, TAXES & FEES-NOT CANDIDATE SPECIFIC

001

Amount of Each Disbursement this Period

Candidate Name

1307.83

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

B. JOHN BERRIS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		29		2016

Mailing Address C/O 211 S. FIFTH ST.

City	State	Zip Code
COLUMBUS	OH	43215

Transaction ID : SB30B.I6330Purpose of Disbursement
PAYROLL, TAXES & FEES-NOT CANDIDATE SPECIFIC

001

Amount of Each Disbursement this Period

Candidate Name

1307.83

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

C. JUSTIN BIS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		29		2016

Mailing Address C/O 211 S. FIFTH ST.

City	State	Zip Code
COLUMBUS	OH	43215

Transaction ID : SB30B.I6331Purpose of Disbursement
PAYROLL, TAXES & FEES-NOT CANDIDATE SPECIFIC

001

Amount of Each Disbursement this Period

Candidate Name

2167.10

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4782.76

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 45 OF 90

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

Full Name (Last, First, Middle Initial)

A. DANIEL BOWER

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		29		2016

Mailing Address C/O 211 S. FIFTH ST.

City	State	Zip Code
COLUMBUS	OH	43215

Transaction ID : SB30B.I6332Purpose of Disbursement
PAYROLL, TAXES & FEES-NOT CANDIDATE SPECIFIC

001

Amount of Each Disbursement this Period

Candidate Name

1866.67

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

B. BLAIR CATHCART

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		29		2016

Mailing Address C/O 211 S. FIFTH ST.

City	State	Zip Code
COLUMBUS	OH	43215

Transaction ID : SB30B.I6333Purpose of Disbursement
PAYROLL, TAXES & FEES-NOT CANDIDATE SPECIFIC

001

Amount of Each Disbursement this Period

Candidate Name

2808.90

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

C. LARA CROTTY

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		29		2016

Mailing Address C/O 211 S. FIFTH ST.

City	State	Zip Code
COLUMBUS	OH	43215

Transaction ID : SB30B.I6334Purpose of Disbursement
PAYROLL, TAXES & FEES-NOT CANDIDATE SPECIFIC

001

Amount of Each Disbursement this Period

Candidate Name

3110.24

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

7785.81

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

Full Name (Last, First, Middle Initial)

A. LES DAVIES

Mailing Address C/O 211 S. FIFTH ST.

City	State	Zip Code
COLUMBUS	OH	43215

Purpose of Disbursement
PAYROLL, TAXES & FEES-NOT CANDIDATE SPECIFIC

001

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		29		2016

Transaction ID : SB30B.I6335

Amount of Each Disbursement this Period

1863.61

Full Name (Last, First, Middle Initial)

B. ELIZABETH GOINS

Mailing Address C/O 211 S. FIFTH ST.

City	State	Zip Code
COLUMBUS	OH	43215

Purpose of Disbursement
PAYROLL, TAXES & FEES-NOT CANDIDATE SPECIFIC

001

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		29		2016

Transaction ID : SB30B.I6337

Amount of Each Disbursement this Period

1308.27

Full Name (Last, First, Middle Initial)

C. TANNER HALE

Mailing Address C/O 211 S. FIFTH ST.

City	State	Zip Code
COLUMBUS	OH	43215

Purpose of Disbursement
PAYROLL, TAXES & FEES-NOT CANDIDATE SPECIFIC

001

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		29		2016

Transaction ID : SB30B.I6338

Amount of Each Disbursement this Period

1307.83

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4479.71

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 47 OF 90

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

Full Name (Last, First, Middle Initial)

A. ELAINE HERRICK

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		29		2016

Mailing Address C/O 211 S. FIFTH ST.

City	State	Zip Code
COLUMBUS	OH	43215

Transaction ID : SB30B.I6340Purpose of Disbursement
PAYROLL, TAXES & FEES-NOT CANDIDATE SPECIFIC

001

Amount of Each Disbursement this Period

Candidate Name

1629.70

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

B. TODD KRUECKEBERG

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		29		2016

Mailing Address C/O 211 S. FIFTH ST.

City	State	Zip Code
COLUMBUS	OH	43215

Transaction ID : SB30B.I6341Purpose of Disbursement
PAYROLL, TAXES & FEES-NOT CANDIDATE SPECIFIC

001

Amount of Each Disbursement this Period

Candidate Name

1308.27

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

C. SCOTT MORGAN

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		29		2016

Mailing Address C/O 211 S. FIFTH ST.

City	State	Zip Code
COLUMBUS	OH	43215

Transaction ID : SB30B.I6342Purpose of Disbursement
PAYROLL, TAXES & FEES-NOT CANDIDATE SPECIFIC

001

Amount of Each Disbursement this Period

Candidate Name

1308.27

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

SUBTOTAL of Disbursements This Page (optional)..... ►

4246.24

TOTAL This Period (last page this line number only)..... ►

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 48 OF 90

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

Full Name (Last, First, Middle Initial)

A. JEFFREY PASTOR

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		29		2016

Mailing Address C/O 211 S. FIFTH ST.

City	State	Zip Code
COLUMBUS	OH	43215

Transaction ID : SB30B.I6343Purpose of Disbursement
PAYROLL, TAXES & FEES-NOT CANDIDATE SPECIFIC

001

Amount of Each Disbursement this Period

Candidate Name

2587.43

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

B. DEBORAH PETTIT

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		29		2016

Mailing Address C/O 211 S. FIFTH ST.

City	State	Zip Code
COLUMBUS	OH	43215

Transaction ID : SB30B.I6344Purpose of Disbursement
PAYROLL, TAXES & FEES-NOT CANDIDATE SPECIFIC

001

Amount of Each Disbursement this Period

Candidate Name

1642.23

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

C. SAMANTHA POLLOCK

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		29		2016

Mailing Address C/O 211 S. FIFTH ST.

City	State	Zip Code
COLUMBUS	OH	43215

Transaction ID : SB30B.I6345Purpose of Disbursement
PAYROLL, TAXES & FEES-NOT CANDIDATE SPECIFIC

001

Amount of Each Disbursement this Period

Candidate Name

1193.79

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

SUBTOTAL of Disbursements This Page (optional)..... ►

5423.45

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 49 OF 90

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

Full Name (Last, First, Middle Initial)

A. KAMILAH PRINCE

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		29		2016

Mailing Address C/O 211 S. FIFTH ST.

Transaction ID : SB30B.I6346

City	State	Zip Code
COLUMBUS	OH	43215

Amount of Each Disbursement this Period

Purpose of Disbursement
PAYROLL, TAXES & FEES-NOT CANDIDATE SPECIFIC

001

2610.52

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

B. SCOTT SANTAMARIA

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		29		2016

Mailing Address C/O 211 S. FIFTH ST.

Transaction ID : SB30B.I6348

City	State	Zip Code
COLUMBUS	OH	43215

Amount of Each Disbursement this Period

Purpose of Disbursement
PAYROLL, TAXES & FEES-NOT CANDIDATE SPECIFIC

001

2382.58

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

C. CHRISTOPHER VELAZCO

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		29		2016

Mailing Address C/O 211 S. FIFTH ST.

Transaction ID : SB30B.I6351

City	State	Zip Code
COLUMBUS	OH	43215

Amount of Each Disbursement this Period

Purpose of Disbursement
PAYROLL, TAXES & FEES-NOT CANDIDATE SPECIFIC

001

2134.14

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

SUBTOTAL of Disbursements This Page (optional)..... ►

7127.24

TOTAL This Period (last page this line number only)..... ►

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 50 OF 90

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

Full Name (Last, First, Middle Initial)

A. MIRANDA WADE

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		29		2016

Mailing Address C/O 211 S. FIFTH ST.

City	State	Zip Code
COLUMBUS	OH	43215

Transaction ID : SB30B.I6352Purpose of Disbursement
PAYROLL, TAXES & FEES-NOT CANDIDATE SPECIFIC

001

Amount of Each Disbursement this Period

Candidate Name

1952.50

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

B. DAVID WARREN

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		29		2016

Mailing Address C/O 211 S. FIFTH ST.

City	State	Zip Code
COLUMBUS	OH	43215

Transaction ID : SB30B.I6355Purpose of Disbursement
PAYROLL, TAXES & FEES-NOT CANDIDATE SPECIFIC

001

Amount of Each Disbursement this Period

Candidate Name

1737.01

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

C. BRANDI WIELGOPOLSKI

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		29		2016

Mailing Address C/O 211 S. FIFTH ST.

City	State	Zip Code
COLUMBUS	OH	43215

Transaction ID : SB30B.I6356Purpose of Disbursement
PAYROLL, TAXES & FEES-NOT CANDIDATE SPECIFIC

001

Amount of Each Disbursement this Period

Candidate Name

1737.01

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

SUBTOTAL of Disbursements This Page (optional)..... ►

5426.52

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 51 OF 90

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

Full Name (Last, First, Middle Initial)

A. LINDSEY WORKMAN

Mailing Address C/O 211 S. FIFTH ST.

City	State	Zip Code
COLUMBUS	OH	43215

Purpose of Disbursement
PAYROLL, TAXES & FEES-NOT CANDIDATE SPECIFIC

001

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		29		2016

Transaction ID : SB30B.I6357

Amount of Each Disbursement this Period

1307.83

Full Name (Last, First, Middle Initial)

B. BRANDON ZANON

Mailing Address C/O 211 S. FIFTH ST.

City	State	Zip Code
COLUMBUS	OH	43215

Purpose of Disbursement
PAYROLL, TAXES & FEES-NOT CANDIDATE SPECIFIC

001

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		29		2016

Transaction ID : SB30B.I6358

Amount of Each Disbursement this Period

1629.70

Full Name (Last, First, Middle Initial)

C. CORY ZIMMERMAN

Mailing Address C/O 211 S. FIFTH ST.

City	State	Zip Code
COLUMBUS	OH	43215

Purpose of Disbursement
PAYROLL, TAXES & FEES-NOT CANDIDATE SPECIFIC

001

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		29		2016

Transaction ID : SB30B.I6359

Amount of Each Disbursement this Period

1307.83

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4245.36

90716.78

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 52 OF 90

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

ActRight Engagement

Nature of Debt (Purpose):

Party hdq-web site updates-not candid sp

Mailing Address 2029 K St. NW, Suite 300

City State

Zip Code

Washington

DC

20006

Outstanding Balance Beginning This Period

1762.50

Transaction ID : SchD.1

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1762.50

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

ActRight Engagement

Nature of Debt (Purpose):

Web site updates

Mailing Address 2029 K St. NW, Ste 300

City State

Zip Code

Washington

DC

20006

Outstanding Balance Beginning This Period

2673.00

Transaction ID : SchD.2

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2673.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

ActRight Engagement

Nature of Debt (Purpose):

Website hosting and maintenance fees

Mailing Address 2029 K St. NW, Ste 300

City

State

Zip Code

Washington

DC

20006

Outstanding Balance Beginning This Period

1575.00

Transaction ID : SchD.3

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1575.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

6010.50

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 53 OF 90

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

American Express

Nature of Debt (Purpose):

Late fees

Mailing Address Box 0001

City State

Zip Code

Los Angeles

CA

90096-8000

Outstanding Balance Beginning This Period

1531.70

Transaction ID : SchD.4

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1531.70

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

American Express

Nature of Debt (Purpose):

Credit card bill

Mailing Address Box 0001

City State

Zip Code

Los Angeles

CA

90096-8000

Outstanding Balance Beginning This Period

6345.51

Transaction ID : SchD.5

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

6345.51

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

American Express

Nature of Debt (Purpose):

Credit card bill

Mailing Address Box 0001

City

State

Zip Code

Los Angeles

CA

90096-8000

Outstanding Balance Beginning This Period

50773.11

Transaction ID : SchD.6

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

50773.11

1) **SUBTOTALS** This Period This Page (optional)..... ►

58650.32

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 54 OF 90

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

AT&T- Hdqtrs PhoneNature of Debt (Purpose):
party hdq phone service

Mailing Address PO Box 13148

City State

Zip Code

Newark

NJ

07101

Outstanding Balance Beginning This Period

2025.35

Transaction ID : SchD.7

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2025.35

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

AT&T- Office Fax

Nature of Debt (Purpose):

Election night costs-not candidate spec

Mailing Address PO Box 8100

City State

Zip Code

Aurora

IL

60507-8100

Outstanding Balance Beginning This Period

2673.65

Transaction ID : SchD.9

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2673.65

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

AT&T-Hdqtrs Phone

Nature of Debt (Purpose):

Party hq phone service-paid

Mailing Address PO Box 13148

City

State

Zip Code

Newark

NJ

07101

Outstanding Balance Beginning This Period

-2025.35

Transaction ID : SchD.8

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

-2025.35

1) **SUBTOTALS** This Period This Page (optional)..... ►

2673.65

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

: 97 `A=G79 @G B9CI G`H9LH`F9 @G H98 `HC`5 `F9DCFHŽG7 <98I @G `CF`+H9A=N5HCB
.

Form/Schedule: SD10

Transaction ID : SchD.8

Party hq phone service-paid from ORP Restricted account

Form/Schedule:

Transaction ID:

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 56 OF 90

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

AT&T-Office FaxNature of Debt (Purpose):
Election night costs-paid

Mailing Address PO Box 8100

City State

Zip Code

Aurora

IL

60507-8100

Outstanding Balance Beginning This Period

-2673.65

Transaction ID : SchD.10

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

-2673.65

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

First Federal BankNature of Debt (Purpose):
Credit card

Mailing Address PO Box 248

City State

Zip Code

Defiance

OH

43512

Outstanding Balance Beginning This Period

11109.94

Transaction ID : SchD.11

Amount Incurred This Period

0.00

Payment This Period

3000.00

Outstanding Balance at Close of This Period

8109.94

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

First Federal BankNature of Debt (Purpose):
Credit Card bill

Mailing Address PO Box 248

City

State

Zip Code

Defiance

OH

43512

Outstanding Balance Beginning This Period

12915.13

Transaction ID : SchD.12

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

12915.13

1) **SUBTOTALS** This Period This Page (optional)..... ►

18351.42

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

: 97 'A-G79 @G B9CI G'H9LH'F9 @G H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SD10

Transaction ID : SchD.10

This invoice was paid via the American Express Credit Card on 2/13/13. The debt is being transferred from AT&T to American Express. The closing date of that American Express bill will be March 3, 2013 and will be included with the debt schedule entry on the April 20th report.

Form/Schedule: SD10

Transaction ID: SchD.11

Paid Oxford Communications for fundraising purposes.

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 58 OF 90

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Gordon Flesch Co Inc

Nature of Debt (Purpose):

party hdq-copy costs-not candidate spec

Mailing Address PO Box 73288

City State

Zip Code

Cleveland

OH

44193

Outstanding Balance Beginning This Period

357.52

Transaction ID : SchD.13

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

357.52

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

King Strategic Communications

Nature of Debt (Purpose):

Printing and postage

Mailing Address 4605 Morse Rd.

Suite 101

City State

Zip Code

Gahanna

OH

43230

Outstanding Balance Beginning This Period

22203.51

Transaction ID : SchD.14

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

22203.51

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

King Strategic Communications

Nature of Debt (Purpose):

Printing and postage

Mailing Address 4605 Morse Rd.

Suite 101

City

State

Zip Code

Gahanna

OH

43230

Outstanding Balance Beginning This Period

30157.90

Transaction ID : SchD.15

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

30157.90

1) **SUBTOTALS** This Period This Page (optional)..... ►

52718.93

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 59 OF 90

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

King Strategic Communications

Nature of Debt (Purpose):

Printing and postage

Mailing Address 4605 Morse Rd.
Suite 101City State Zip Code
Gahanna OH 43230

Outstanding Balance Beginning This Period

90626.24

Transaction ID : SchD.16

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

90626.24

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Loud & Clear Inc

Nature of Debt (Purpose):

Election ngt production- not candidate s

Mailing Address 2001 Dalton Ave.
Suite 201City State Zip Code
Cincinnati OH 45214

Outstanding Balance Beginning This Period

20000.00

Transaction ID : SchD.17

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

20000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Loud & Clear Inc

Nature of Debt (Purpose):

Election night production-paid via Amex

Mailing Address 2001 Dalton Ave
Suite 201City State Zip Code
Cincinnati OH 45214

Outstanding Balance Beginning This Period

-20000.00

Transaction ID : SchD.18

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

-20000.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

90626.24

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB
.

Form/Schedule: SD10

Transaction ID : SchD.17

This invoice was not included on the original report filed 11/26/12 because the invoice was not received by the Ohio Republican Party accounting staff until 12/14/12. This invoice was paid on the American Express that was added to the Debt schedule dated 2/6/13-therefore it is included on the debt schedule as part of the American Express and will be removed from the debt schedule.

Form/Schedule: SD10

Transaction ID: SchD.18

This vendor was paid via American Express on 1/24/13. This debt was previously recorded as Loud and Clear is now included in the debt reported on this schedule as owed to American Express, dated 2/6/13.

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 61 OF 90

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Majority StrategiesNature of Debt (Purpose):
Printing/postageMailing Address 135 Professional Dr.
Suite 104City State Zip Code
Ponte Vedra Beach FL 32082

Outstanding Balance Beginning This Period

31000.00

Transaction ID : SchD.19

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

31000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Oxford CommunicationsNature of Debt (Purpose):
Party Op fundraising mailing-prospecting

Mailing Address 121 S. Alfred St

City State Zip Code
Alexandria VA 22314

Outstanding Balance Beginning This Period

1968.12

Transaction ID : SchD.20

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1968.12

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Oxford CommunicationsNature of Debt (Purpose):
Pty hdq operations telemarketing fundrai

Mailing Address 121 S. Alfred St.

City State Zip Code
Alexandria VA 22314

Outstanding Balance Beginning This Period

15162.00

Transaction ID : SchD.21

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

15162.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

48130.12

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

: 97 `A=G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+9A=N5HCB
.

Form/Schedule: SD10

Transaction ID : SchD.21

Not candidate specific

Form/Schedule:

Transaction ID:

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 63 OF 90

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Oxford Communications

Nature of Debt (Purpose):

Pty hdq operations telemarketing fundrai

Mailing Address 121 S. Alfred St.

City State

Alexandria

Zip Code

VA

22314

Outstanding Balance Beginning This Period

15162.00

Transaction ID : SchD.22

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

15162.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Oxford Communications

Nature of Debt (Purpose):

Pty operations fundraising- telemarketin

Mailing Address 121 S. Alfred St.

City State

Alexandria

Zip Code

VA

22314

Outstanding Balance Beginning This Period

13234.20

Transaction ID : SchD.23

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

13234.20

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Oxford Communications

Nature of Debt (Purpose):

pty operations fundraising-telemarketing

Mailing Address 121 S. Alfred St.

City

Alexandria

State

VA

Zip Code

22314

Outstanding Balance Beginning This Period

1448.16

Transaction ID : SchD.24

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1448.16

1) **SUBTOTALS** This Period This Page (optional)..... ►

29844.36

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

: 97 `A=G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+9A=N5HCB
.

Form/Schedule: SD10

Transaction ID : SchD.22

Not candidate specific

Form/Schedule: SD10

Transaction ID: SchD.23

Not candidate specific

: 97 `A=G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+9A=N5HCB
.

Form/Schedule: SD10

Transaction ID : SchD.24

Not candidate specific

Form/Schedule:

Transaction ID:

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 66 OF 90

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Oxford Communications

Nature of Debt (Purpose):

pty operations fundraising-telemarketing

Mailing Address 121 S. Alfred St.

City State

Zip Code

Alexandria

VA

22314

Outstanding Balance Beginning This Period

895.00

Transaction ID : SchD.25

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

895.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Oxford Communications

Nature of Debt (Purpose):

pty operations fundraising-telemarketing

Mailing Address 121 S. Alfred St.

City State

Zip Code

Alexandria

VA

22314

Outstanding Balance Beginning This Period

1177.00

Transaction ID : SchD.26

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1177.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Oxford Communications

Nature of Debt (Purpose):

Pty operations fundraising- telemarketin

Mailing Address 121 S. Alfred St.

City

State

Zip Code

Alexandria

VA

22314

Outstanding Balance Beginning This Period

1320.00

Transaction ID : SchD.27

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1320.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

3392.00

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

: 97 `A=G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+9A=N5HCB
.

Form/Schedule: SD10

Transaction ID : SchD.25

Not candidate specific

Form/Schedule: SD10

Transaction ID: SchD.26

Not candidate specific

: 97 `A=G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+9A=N5HCB
.

Form/Schedule: SD10

Transaction ID : SchD.27

Not candidate specific

Form/Schedule:

Transaction ID:

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 69 OF 90

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Oxford Communications

Nature of Debt (Purpose):

Pty operations fundraising mailing-prosp

Mailing Address 121 S. Alfred St.

City State

Zip Code

Alexandria

VA

22314

Outstanding Balance Beginning This Period

13416.56

Transaction ID : SchD.28

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

13416.56

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Oxford Communications

Nature of Debt (Purpose):

Pty operations fundraising telemarketing

Mailing Address 121 S. Alfred St.

City State

Zip Code

Alexandria

VA

22314

Outstanding Balance Beginning This Period

1755.00

Transaction ID : SchD.29

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1755.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Oxford Communications

Nature of Debt (Purpose):

Fundraising expenses-paid from ORP Restr

Mailing Address 121 S. Alfred St.

City

State

Zip Code

Alexandria

VA

22314

Outstanding Balance Beginning This Period

-10000.00

Transaction ID : SchD.30

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

-10000.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

5171.56

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 70 OF 90

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Oxford Communications

Nature of Debt (Purpose):

Fundraising expenses paid from ORP Restr

Mailing Address 121 S. Alfred St.

City State

Zip Code

Alexandria

VA

22314

Outstanding Balance Beginning This Period

-10000.00

Transaction ID : SchD.31

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

-10000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Quicken Loans Arena

Nature of Debt (Purpose):

Venue/Security/Staff costs

Mailing Address 1 Center Court

City State

Zip Code

Cleveland

OH

44115

Outstanding Balance Beginning This Period

153346.58

Transaction ID : SchD.32

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

153346.58

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional)..... ►

143346.58

2) **TOTALS** This Period (last page this line number only)..... ►

458915.68

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

458915.68

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

PAGE 71 OF 90

FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)
 OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

NAME OF ACCOUNT

Ohio Republican Party State Central & Executive Committee

DATE OF RECEIPT

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	5		2	0	1	6

TOTAL AMOUNT TRANSFERRED

5102.60

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

5102.60

Transaction ID : SchH3.1

ii) Generic Voter Drive

iii) Exempt Activities.....

iv) Direct Fundraising (List Activity or Event Identifier)

a)

b)

c) Total Amount Transferred For Direct Fundraising

v) Direct Candidate Support (List Activity or Event Identifier)

a)

b)

c) Total Amount Transferred For Direct Candidate Support.....

vi) Public Communications Referring Only to Party (Made by PAC)

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred).....

: 97 `A=G79 @G B9CI G`H9LH`F9 @G H98 `HC`5 `F9DCFHŽG7 <98I @G `CF`+H9A=N5HCB
.

Form/Schedule: H3

Transaction ID : SchH3.1

Business Insurance Premium Allocation

Form/Schedule:

Transaction ID:

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

PAGE 73 OF 90

FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)
 OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

NAME OF ACCOUNT

Ohio Republican Party State Central & Executive Committee

DATE OF RECEIPT

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	8		2	0	1	6

TOTAL AMOUNT TRANSFERRED

32810.00

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

32810.00

Transaction ID : SchH3.2

ii) Generic Voter Drive

iii) Exempt Activities.....

iv) Direct Fundraising (List Activity or Event Identifier)

a)

b)

c) Total Amount Transferred For Direct Fundraising

v) Direct Candidate Support (List Activity or Event Identifier)

a)

b)

c) Total Amount Transferred For Direct Candidate Support.....

vi) Public Communications Referring Only to Party (Made by PAC)

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

37912.60

TOTAL This Period (Generic Voter Drive)

0.00

TOTAL This Period (Exempt Activities)

0.00

TOTAL This Period (Direct Fundraising)

0.00

TOTAL This Period (Direct Candidate Support)

0.00

TOTAL This Period (Public Communications Referring Only to Party)

0.00

TOTAL This Period (Total Amount Transferred).....

37912.60

: 97 `A=G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+9A=N5HCB
.

Form/Schedule: H3

Transaction ID : SchH3.2

Payroll Allocation 12/4/15

Form/Schedule:

Transaction ID:

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 75 OF 90

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

A. Full Name (Last, First, Middle Initial) CECILY DODGE			Transaction ID : SB21A.6302	
Mailing Address C/O 211 S. FIFTH ST.				
City COLUMBUS	State OH	Zip Code 43215		
Purpose of Disbursement: PAYROLL, TAXES & FEES-NOT CANDIDATE SPECIFIC			001 Category/ Type	Allocated Activity or Event: <input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; text-align: right;">74.73</div>
Activity or Event Identifier:				
FEDERAL SHARE		+	NONFEDERAL SHARE	
26.90			47.83	
		=	TOTAL AMOUNT	
			74.73	

B. Full Name (Last, First, Middle Initial) CECILY DODGE			Transaction ID : SB21A.6336	
Mailing Address C/O 211 S. FIFTH ST.				
City COLUMBUS	State OH	Zip Code 43215		
Purpose of Disbursement: PAYROLL, TAXES & FEES-NOT CANDIDATE SPECIFIC			001 Category/ Type	Allocated Activity or Event: <input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; text-align: right;">242.98</div>
Activity or Event Identifier:				
FEDERAL SHARE		+	NONFEDERAL SHARE	
60.57			107.68	
		=	TOTAL AMOUNT	
			168.25	

C. Full Name (Last, First, Middle Initial) SARAH HAUSER			Transaction ID : SB21A.6306	
Mailing Address C/O 211 S. FIFTH ST.				
City COLUMBUS	State OH	Zip Code 43215		
Purpose of Disbursement: PAYROLL, TAXES & FEES-NOT CANDIDATE SPECIFIC			001 Category/ Type	Allocated Activity or Event: <input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; text-align: right;">1701.48</div>
Activity or Event Identifier:				
FEDERAL SHARE		+	NONFEDERAL SHARE	
525.06			933.44	
		=	TOTAL AMOUNT	
			1458.50	

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
612.53		1088.95		1701.48

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 76 OF 90

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

A. Full Name (Last, First, Middle Initial) SARAH HAUSER		Transaction ID : SB21A.6339		Allocated Activity or Event:	
Mailing Address C/O 211 S. FIFTH ST.				<input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
City COLUMBUS	State OH	Zip Code 43215		Allocated Activity or Event Year-To-Date	
Purpose of Disbursement: PAYROLL, TAXES & FEES-NOT CANDIDATE SPECIFIC		001		3169.80	
Activity or Event Identifier:		Category/ Type		Date	
				M M / D D / Y Y Y Y Y Y 01 / 29 / 2016	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
528.60			939.72		1468.32

B. Full Name (Last, First, Middle Initial) KATHLEEN REARDON		Transaction ID : SB21A.6315		Allocated Activity or Event:	
Mailing Address C/O 211 S. FIFTH ST.				<input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
City COLUMBUS	State OH	Zip Code 43215		Allocated Activity or Event Year-To-Date	
Purpose of Disbursement: PAYROLL, TAXES & FEES-NOT CANDIDATE SPECIFIC		001		4782.55	
Activity or Event Identifier:		Category/ Type		Date	
				M M / D D / Y Y Y Y Y Y 01 / 15 / 2016	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
580.59			1032.16		1612.75

C. Full Name (Last, First, Middle Initial) KATHLEEN REARDON		Transaction ID : SB21A.6347		Allocated Activity or Event:	
Mailing Address C/O 211 S. FIFTH ST.				<input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
City COLUMBUS	State OH	Zip Code 43215		Allocated Activity or Event Year-To-Date	
Purpose of Disbursement: PAYROLL, TAXES & FEES-NOT CANDIDATE SPECIFIC		001		8014.80	
Activity or Event Identifier:		Category/ Type		Date	
				M M / D D / Y Y Y Y Y Y 01 / 29 / 2016	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
1163.61			2068.64		3232.25

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2272.80		4040.52		6313.32

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 77 OF 90

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

A. Full Name (Last, First, Middle Initial) JULIA SMYTHE		Transaction ID : SB21A.6317		Allocated Activity or Event:	
Mailing Address C/O 211 S. FIFTH ST.				<input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
City COLUMBUS	State OH	Zip Code 43215		Allocated Activity or Event Year-To-Date	
Purpose of Disbursement: PAYROLL, TAXES & FEES-NOT CANDIDATE SPECIFIC		001		9623.98	
Activity or Event Identifier:		Category/ Type		Date	
				M M / D D / Y Y Y Y Y Y 01 / 15 / 2016	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
579.30			1029.88		1609.18

B. Full Name (Last, First, Middle Initial) JULIA SMYTHE		Transaction ID : SB21A.6349		Allocated Activity or Event:	
Mailing Address C/O 211 S. FIFTH ST.				<input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
City COLUMBUS	State OH	Zip Code 43215		Allocated Activity or Event Year-To-Date	
Purpose of Disbursement: PAYROLL, TAXES & FEES-NOT CANDIDATE SPECIFIC		001		11243.85	
Activity or Event Identifier:		Category/ Type		Date	
				M M / D D / Y Y Y Y Y Y 01 / 29 / 2016	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
583.15			1036.72		1619.87

C. Full Name (Last, First, Middle Initial) BRENTON TEMPLE		Transaction ID : SB21A.6318		Allocated Activity or Event:	
Mailing Address C/O 211 S. FIFTH ST.				<input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
City COLUMBUS	State OH	Zip Code 43215		Allocated Activity or Event Year-To-Date	
Purpose of Disbursement: PAYROLL, TAXES & FEES-NOT CANDIDATE SPECIFIC		001		14691.37	
Activity or Event Identifier:		Category/ Type		Date	
				M M / D D / Y Y Y Y Y Y 01 / 15 / 2016	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
1241.11			2206.41		3447.52

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2403.56		4273.01		6676.57

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

A. Full Name (Last, First, Middle Initial) BRENTON TEMPLE			Transaction ID : SB21A.6350		Allocated Activity or Event: <input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address C/O 211 S. FIFTH ST.						
City COLUMBUS	State OH	Zip Code 43215				
Purpose of Disbursement: PAYROLL, TAXES & FEES-NOT CANDIDATE SPECIFIC			<div style="border: 1px solid black; padding: 2px;">001</div> Category/ Type		Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; text-align: right;">18148.71</div>	
Activity or Event Identifier:					Date <div style="border: 1px solid black; padding: 2px;">01</div> / <div style="border: 1px solid black; padding: 2px;">29</div> / <div style="border: 1px solid black; padding: 2px;">2016</div>	
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
1244.64			2212.70			3457.34

B. Full Name (Last, First, Middle Initial) SUSAN WAIDNER			Transaction ID : SB21A.6321		Allocated Activity or Event: <input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address C/O 211 S. FIFTH ST.						
City COLUMBUS	State OH	Zip Code 43215				
Purpose of Disbursement: PAYROLL, TAXES & FEES-NOT CANDIDATE SPECIFIC			<div style="border: 1px solid black; padding: 2px;">001</div> Category/ Type		Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; text-align: right;">21396.23</div>	
Activity or Event Identifier:					Date <div style="border: 1px solid black; padding: 2px;">01</div> / <div style="border: 1px solid black; padding: 2px;">15</div> / <div style="border: 1px solid black; padding: 2px;">2016</div>	
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
1169.11			2078.41			3247.52

C. Full Name (Last, First, Middle Initial) SUSAN WAIDNER			Transaction ID : SB21A.6353		Allocated Activity or Event: <input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address C/O 211 S. FIFTH ST.						
City COLUMBUS	State OH	Zip Code 43215				
Purpose of Disbursement: PAYROLL, TAXES & FEES-NOT CANDIDATE SPECIFIC			<div style="border: 1px solid black; padding: 2px;">001</div> Category/ Type		Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; text-align: right;">24654.45</div>	
Activity or Event Identifier:					Date <div style="border: 1px solid black; padding: 2px;">01</div> / <div style="border: 1px solid black; padding: 2px;">29</div> / <div style="border: 1px solid black; padding: 2px;">2016</div>	
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
1172.96			2085.26			3258.22

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3586.71		6376.37		9963.08

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

A. Full Name (Last, First, Middle Initial) SHERRI WARNER		Transaction ID : SB21A.6269		Allocated Activity or Event:	
Mailing Address C/O 211 S. 5TH ST.				<input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
City COLUMBUS	State OH	Zip Code 43215		Allocated Activity or Event Year-To-Date	
Purpose of Disbursement: COMPLIANCE CONSULTING-NOT CANDIDATE SPECIFIC		001		29077.65	
Activity or Event Identifier:		Category/ Type		Date	
				M M / D D / Y Y Y Y Y Y 01 / 14 / 2016	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
1592.35			2830.85		4423.20

B. Full Name (Last, First, Middle Initial) SHERRI WARNER		Transaction ID : SB21A.6270		Allocated Activity or Event:	
Mailing Address C/O 211 S. 5TH ST.				<input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
City COLUMBUS	State OH	Zip Code 43215		Allocated Activity or Event Year-To-Date	
Purpose of Disbursement: COMPLIANCE CONSULTING-NOT CANDIDATE SPECIFIC		001		33500.85	
Activity or Event Identifier:		Category/ Type		Date	
				M M / D D / Y Y Y Y Y Y 01 / 29 / 2016	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
1592.35			2830.85		4423.20

C. Full Name (Last, First, Middle Initial) 2DIALOG		Transaction ID : SB21A.6291		Allocated Activity or Event:	
Mailing Address PO BOX 203421				<input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
City DALLAS	State TX	Zip Code 75320-3421		Allocated Activity or Event Year-To-Date	
Purpose of Disbursement: WEBSITE DESIGN/SUPPORT		001		39000.85	
Activity or Event Identifier:		Category/ Type		Date	
				M M / D D / Y Y Y Y Y Y 01 / 15 / 2016	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
1980.00			3520.00		5500.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5164.70		9181.70		14346.40

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

A. Full Name (Last, First, Middle Initial) AMERICAN EXPRESS CREDIT CARD			Transaction ID : SB21A.6275			Allocated Activity or Event: <input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address BOX 0001								
City LOS ANGELES		State CA		Zip Code 90096-8000				
Purpose of Disbursement: MERCHANT FEE				001 Category/ Type		Allocated Activity or Event Year-To-Date 39008.80		
Activity or Event Identifier:						Date MM / DD / YYYY 01 / 04 / 2016		
FEDERAL SHARE			+			NONFEDERAL SHARE		
2.86						5.09		
			=			TOTAL AMOUNT		
						7.95		

B. Full Name (Last, First, Middle Initial) AMERICAN EXPRESS CREDIT CARD			Transaction ID : SB21A.6361			Allocated Activity or Event: <input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address BOX 0001								
City LOS ANGELES		State CA		Zip Code 90096-8000				
Purpose of Disbursement: MERCHANT FEE				001 Category/ Type		Allocated Activity or Event Year-To-Date 39009.53		
Activity or Event Identifier:						Date MM / DD / YYYY 01 / 20 / 2016		
FEDERAL SHARE			+			NONFEDERAL SHARE		
0.26						0.47		
			=			TOTAL AMOUNT		
						0.73		

C. Full Name (Last, First, Middle Initial) CITY OF COLUMBUS-ELECTRICITY			Transaction ID : SB21A.6286			Allocated Activity or Event: <input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address POWER SEWER AND WATER SERVICES PO BOX 182882								
City COLUMBUS		State OH		Zip Code 43218-2882				
Purpose of Disbursement: UTILITY PAYMENT				001 Category/ Type		Allocated Activity or Event Year-To-Date 45009.06		
Activity or Event Identifier:						Date MM / DD / YYYY 01 / 28 / 2016		
FEDERAL SHARE			+			NONFEDERAL SHARE		
2159.83						3839.70		
			=			TOTAL AMOUNT		
						5999.53		

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2162.95		3845.26		6008.21

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

A. Full Name (Last, First, Middle Initial) CMDI			Transaction ID : SB21A.6288			Allocated Activity or Event:		
Mailing Address 1593 SPRING HILL RD, STE 400						<input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
City TYSONS CORNER		State VA		Zip Code 22182		Allocated Activity or Event Year-To-Date		
Purpose of Disbursement: WEB MERCHANT FEE				001		46085.18		
Activity or Event Identifier:				Category/ Type		Date		
						M M / D D / Y Y Y Y Y Y 01 / 20 / 2016		
FEDERAL SHARE			+			NONFEDERAL SHARE		
16.77						29.81		
						=		
						TOTAL AMOUNT		
						46.58		

B. Full Name (Last, First, Middle Initial) CMDI			Transaction ID : SB21A.6289			Allocated Activity or Event:		
Mailing Address 1593 SPRING HILL RD, STE 400						<input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
City TYSONS CORNER		State VA		Zip Code 22182		Allocated Activity or Event Year-To-Date		
Purpose of Disbursement: WEB MERCHANT FEE				001		46090.99		
Activity or Event Identifier:				Category/ Type		Date		
						M M / D D / Y Y Y Y Y Y 01 / 26 / 2016		
FEDERAL SHARE			+			NONFEDERAL SHARE		
2.09						3.72		
						=		
						TOTAL AMOUNT		
						5.81		

C. Full Name (Last, First, Middle Initial) GORDON BIRSCH			Transaction ID : SB21A.6272			Allocated Activity or Event:		
Mailing Address 401 N. FRONT ST.						<input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
City COLUMBUS		State OH		Zip Code 43215		Allocated Activity or Event Year-To-Date		
Purpose of Disbursement: FOOD/BEVERAGE STATE MEETING				001		46994.30		
Activity or Event Identifier:				Category/ Type		Date		
						M M / D D / Y Y Y Y Y Y 01 / 13 / 2016		
FEDERAL SHARE			+			NONFEDERAL SHARE		
325.19						578.12		
						=		
						TOTAL AMOUNT		
						903.31		

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
344.05		611.65		955.70

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

A. Full Name (Last, First, Middle Initial) HUNTINGTON NATIONAL BANK- MAIN			Transaction ID : SB21A.6255			Allocated Activity or Event:		
Mailing Address 41 S. HIGH STREET, HC0642						<input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
City COLUMBUS	State OH	Zip Code 43215				Allocated Activity or Event Year-To-Date		
Purpose of Disbursement: BANK FEE			001			55165.07		
Activity or Event Identifier:			Category/ Type			Date		
						M M M / D D D / Y Y Y Y Y Y 01 / 04 / 2016		
FEDERAL SHARE			+			NONFEDERAL SHARE		
71.38						=		
			126.89			TOTAL AMOUNT		
						198.27		

B. Full Name (Last, First, Middle Initial) HUNTINGTON NATIONAL BANK- MAIN			Transaction ID : SB21A.6256			Allocated Activity or Event:		
Mailing Address 41 S. HIGH STREET, HC0642						<input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
City COLUMBUS	State OH	Zip Code 43215				Allocated Activity or Event Year-To-Date		
Purpose of Disbursement: BANK FEE			001			55220.20		
Activity or Event Identifier:			Category/ Type			Date		
						M M M / D D D / Y Y Y Y Y Y 01 / 04 / 2016		
FEDERAL SHARE			+			NONFEDERAL SHARE		
19.85						=		
			35.28			TOTAL AMOUNT		
						55.13		

C. Full Name (Last, First, Middle Initial) HUNTINGTON NATIONAL BANK- MAIN			Transaction ID : SB21A.6257			Allocated Activity or Event:		
Mailing Address 41 S. HIGH STREET, HC0642						<input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
City COLUMBUS	State OH	Zip Code 43215				Allocated Activity or Event Year-To-Date		
Purpose of Disbursement: BANK FEE			001			55274.76		
Activity or Event Identifier:			Category/ Type			Date		
						M M M / D D D / Y Y Y Y Y Y 01 / 04 / 2016		
FEDERAL SHARE			+			NONFEDERAL SHARE		
19.64						=		
			34.92			TOTAL AMOUNT		
						54.56		

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
110.87		197.09		307.96

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

A. Full Name (Last, First, Middle Initial) HUNTINGTON NATIONAL BANK- MAIN			Transaction ID : SB21A.6259			Allocated Activity or Event:		
Mailing Address 41 S. HIGH STREET, HC0642						<input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
City COLUMBUS	State OH	Zip Code 43215				Allocated Activity or Event Year-To-Date		
Purpose of Disbursement: BAN			001			55299.76		
Activity or Event Identifier:			Category/ Type			Date		
						M M / D D / Y Y Y Y Y Y 01 / 04 / 2016		
FEDERAL SHARE			+			NONFEDERAL SHARE		
9.00						=		
			16.00			TOTAL AMOUNT		
						25.00		

B. Full Name (Last, First, Middle Initial) HUNTINGTON NATIONAL BANK- MAIN			Transaction ID : SB21A.6260			Allocated Activity or Event:		
Mailing Address 41 S. HIGH STREET, HC0642						<input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
City COLUMBUS	State OH	Zip Code 43215				Allocated Activity or Event Year-To-Date		
Purpose of Disbursement:			001			55350.76		
Activity or Event Identifier:			Category/ Type			Date		
						M M / D D / Y Y Y Y Y Y 01 / 04 / 2016		
FEDERAL SHARE			+			NONFEDERAL SHARE		
18.36						=		
			32.64			TOTAL AMOUNT		
						51.00		

C. Full Name (Last, First, Middle Initial) HUNTINGTON NATIONAL BANK- MAIN			Transaction ID : SB21A.6261			Allocated Activity or Event:		
Mailing Address 41 S. HIGH STREET, HC0642						<input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
City COLUMBUS	State OH	Zip Code 43215				Allocated Activity or Event Year-To-Date		
Purpose of Disbursement: BANK FEE			001			55370.71		
Activity or Event Identifier:			Category/ Type			Date		
						M M / D D / Y Y Y Y Y Y 01 / 04 / 2016		
FEDERAL SHARE			+			NONFEDERAL SHARE		
7.18						=		
			12.77			TOTAL AMOUNT		
						19.95		

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
34.54		61.41		95.95

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

A. Full Name (Last, First, Middle Initial) HUNTINGTON NATIONAL BANK- MAIN			Transaction ID : SB21A.6262			Allocated Activity or Event:		
Mailing Address 41 S. HIGH STREET, HC0642						<input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
City COLUMBUS	State OH	Zip Code 43215				Allocated Activity or Event Year-To-Date		
Purpose of Disbursement: BANK FEE			001			55390.71		
Activity or Event Identifier:			Category/ Type			Date		
						MM / DD / YYYY 01 / 15 / 2016		
FEDERAL SHARE			+			NONFEDERAL SHARE		
7.20						=		
			12.80			TOTAL AMOUNT		
						20.00		

B. Full Name (Last, First, Middle Initial) HUNTINGTON NATIONAL BANK- MAIN			Transaction ID : SB21A.6263			Allocated Activity or Event:		
Mailing Address 41 S. HIGH STREET, HC0642						<input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
City COLUMBUS	State OH	Zip Code 43215				Allocated Activity or Event Year-To-Date		
Purpose of Disbursement: BANK FEE			001			55397.59		
Activity or Event Identifier:			Category/ Type			Date		
						MM / DD / YYYY 01 / 15 / 2016		
FEDERAL SHARE			+			NONFEDERAL SHARE		
2.48						=		
			4.40			TOTAL AMOUNT		
						6.88		

C. Full Name (Last, First, Middle Initial) HUNTINGTON NATIONAL BANK- MAIN			Transaction ID : SB21A.6264			Allocated Activity or Event:		
Mailing Address 41 S. HIGH STREET, HC0642						<input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
City COLUMBUS	State OH	Zip Code 43215				Allocated Activity or Event Year-To-Date		
Purpose of Disbursement: BANK FEE			001			55690.34		
Activity or Event Identifier:			Category/ Type			Date		
						MM / DD / YYYY 01 / 15 / 2016		
FEDERAL SHARE			+			NONFEDERAL SHARE		
105.39						=		
			187.36			TOTAL AMOUNT		
						292.75		

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
115.07		204.56		319.63

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

A. Full Name (Last, First, Middle Initial) Transaction ID : SB21A.6265			Allocated Activity or Event:	
HUNTINGTON NATIONAL BANK- MAIN			<input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 41 S. HIGH STREET, HC0642			<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City	State	Zip Code	<input type="checkbox"/> Public Comm (ref to party only) by PAC	
COLUMBUS	OH	43215		
Purpose of Disbursement: BANK FEE		001 Category/ Type	Allocated Activity or Event Year-To-Date	
Activity or Event Identifier:			55693.34	
			Date MM / DD / YYYY 01 / 16 / 2016	
FEDERAL SHARE		+	NONFEDERAL SHARE	
1.08			3.00	
		=	TOTAL AMOUNT	
			3.00	

B. Full Name (Last, First, Middle Initial) Transaction ID : SB21A.6266			Allocated Activity or Event:	
HUNTINGTON NATIONAL BANK- MAIN			<input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 41 S. HIGH STREET, HC0642			<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City	State	Zip Code	<input type="checkbox"/> Public Comm (ref to party only) by PAC	
COLUMBUS	OH	43215		
Purpose of Disbursement: BANK FEE		001 Category/ Type	Allocated Activity or Event Year-To-Date	
Activity or Event Identifier:			55713.34	
			Date MM / DD / YYYY 01 / 16 / 2016	
FEDERAL SHARE		+	NONFEDERAL SHARE	
7.20			20.00	
		=	TOTAL AMOUNT	
			20.00	

C. Full Name (Last, First, Middle Initial) Transaction ID : SB21A.6267			Allocated Activity or Event:	
HUNTINGTON NATIONAL BANK- MAIN			<input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 41 S. HIGH STREET, HC0642			<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City	State	Zip Code	<input type="checkbox"/> Public Comm (ref to party only) by PAC	
COLUMBUS	OH	43215		
Purpose of Disbursement: BANK FEE		001 Category/ Type	Allocated Activity or Event Year-To-Date	
Activity or Event Identifier:			55751.34	
			Date MM / DD / YYYY 01 / 17 / 2016	
FEDERAL SHARE		+	NONFEDERAL SHARE	
13.68			38.00	
		=	TOTAL AMOUNT	
			38.00	

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
21.96		39.04		61.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 88 OF 90

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

A. Full Name (Last, First, Middle Initial) MAILFINANCE			Transaction ID : SB21A.6276			Allocated Activity or Event:		
Mailing Address 25881 NETWORK PL						<input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
City CHICAGO	State IL	Zip Code 60673-1258				Allocated Activity or Event Year-To-Date		
Purpose of Disbursement: OFFICE EQUIPMENT LEASE						58751.34		
Activity or Event Identifier:			Category/ Type			Date		
						M M / D D / Y Y Y Y Y Y 01 / 15 / 2016		
FEDERAL SHARE			+			NONFEDERAL SHARE		
1080.00						=		
			1920.00			TOTAL AMOUNT		
						3000.00		

B. Full Name (Last, First, Middle Initial) MINUTEMAN HR			Transaction ID : SB21A.6283			Allocated Activity or Event:		
Mailing Address 3740 CARNEGIE AVE.						<input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
City CLEVELAND	State OH	Zip Code 44115				Allocated Activity or Event Year-To-Date		
Purpose of Disbursement: PAYROLL FEE			001			59010.77		
Activity or Event Identifier:			Category/ Type			Date		
						M M / D D / Y Y Y Y Y Y 01 / 25 / 2016		
FEDERAL SHARE			+			NONFEDERAL SHARE		
53.31						=		
			94.77			TOTAL AMOUNT		
						148.08		

C. Full Name (Last, First, Middle Initial) MINUTEMAN HR			Transaction ID : SB21A.6284			Allocated Activity or Event:		
Mailing Address 3740 CARNEGIE AVE.						<input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
City CLEVELAND	State OH	Zip Code 44115				Allocated Activity or Event Year-To-Date		
Purpose of Disbursement: PAYROLL FEE			001			59010.87		
Activity or Event Identifier:			Category/ Type			Date		
						M M / D D / Y Y Y Y Y Y 01 / 25 / 2016		
FEDERAL SHARE			+			NONFEDERAL SHARE		
0.04						=		
			0.06			TOTAL AMOUNT		
						0.10		

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1133.35		2014.83		3148.18

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

A. Full Name (Last, First, Middle Initial) SHERATON COLUMBUS ON CAPITAL SQUARE			Transaction ID : SB21A.6271			Allocated Activity or Event:		
Mailing Address 75 E STATE ST						<input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
City COLUMBUS	State OH	Zip Code 43215				Allocated Activity or Event Year-To-Date		
Purpose of Disbursement: FOOD/BEVERAGE FOR STATE MEETING			001			62054.63		
Activity or Event Identifier:			Category/ Type			Date		
						M M / D D / Y Y Y Y Y Y 01 / 06 / 2016		
FEDERAL SHARE			+			NONFEDERAL SHARE		
1095.75						=		
			1948.01			TOTAL AMOUNT		
						3043.76		

B. Full Name (Last, First, Middle Initial) TRAVELERS			Transaction ID : SB21A.6281			Allocated Activity or Event:		
Mailing Address CL REMITTANCE CENTER						<input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
City HARTFORD	State CT	Zip Code 06183-1008				Allocated Activity or Event Year-To-Date		
Purpose of Disbursement: OFFICE INSURANCE PREMIUM			001			62236.63		
Activity or Event Identifier:			Category/ Type			Date		
						M M / D D / Y Y Y Y Y Y 01 / 22 / 2016		
FEDERAL SHARE			+			NONFEDERAL SHARE		
65.52						=		
			116.48			TOTAL AMOUNT		
						182.00		

C. Full Name (Last, First, Middle Initial) UNITED HEALTH CARE INSURANCE			Transaction ID : SB21A.6273			Allocated Activity or Event:		
Mailing Address COMPANY OF THE RIVER VALLEY 22070 NETWORK PL						<input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
City CHICAGO	State IL	Zip Code 60673-1220				Allocated Activity or Event Year-To-Date		
Purpose of Disbursement: INSURANCE PREMIUM-STAFF			001			73423.31		
Activity or Event Identifier:			Category/ Type			Date		
						M M / D D / Y Y Y Y Y Y 01 / 06 / 2016		
FEDERAL SHARE			+			NONFEDERAL SHARE		
4027.20						=		
			7159.48			TOTAL AMOUNT		
						11186.68		

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5188.47		9223.97		14412.44

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 90 OF 90

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

A. Full Name (Last, First, Middle Initial) UNITED HEALTH CARE INSURANCE			Transaction ID : SB21A.6274			Allocated Activity or Event: <input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address COMPANY OF THE RIVER VALLEY 22070 NETWORK PL								
City CHICAGO		State IL		Zip Code 60673-1220				
Purpose of Disbursement: INSURANCE PREMIUM-STAFF					<div style="border: 1px solid black; padding: 2px;">001</div> Category/ Type		Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; text-align: right;">79363.17</div>	
Activity or Event Identifier:							Date <div style="border: 1px solid black; padding: 2px;">01</div> / <div style="border: 1px solid black; padding: 2px;">06</div> / <div style="border: 1px solid black; padding: 2px;">2016</div>	
FEDERAL SHARE			+			NONFEDERAL SHARE		
<div style="border: 1px solid black; padding: 2px;">2138.35</div>						<div style="border: 1px solid black; padding: 2px;">3801.51</div>		
			=			TOTAL AMOUNT		
						<div style="border: 1px solid black; padding: 2px;">5939.86</div>		

B. Full Name (Last, First, Middle Initial) UNITED HEALTH CARE INSURANCE			Transaction ID : SB21A.6292			Allocated Activity or Event: <input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address COMPANY OF THE RIVER VALLEY 22070 NETWORK PL								
City CHICAGO		State IL		Zip Code 60673-1220				
Purpose of Disbursement: INSURANCE PREMIUM-STAFF					<div style="border: 1px solid black; padding: 2px;">001</div> Category/ Type		Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; text-align: right;">87016.95</div>	
Activity or Event Identifier:							Date <div style="border: 1px solid black; padding: 2px;">01</div> / <div style="border: 1px solid black; padding: 2px;">06</div> / <div style="border: 1px solid black; padding: 2px;">2016</div>	
FEDERAL SHARE			+			NONFEDERAL SHARE		
<div style="border: 1px solid black; padding: 2px;">2755.36</div>						<div style="border: 1px solid black; padding: 2px;">4898.42</div>		
			=			TOTAL AMOUNT		
						<div style="border: 1px solid black; padding: 2px;">7653.78</div>		

C. Full Name (Last, First, Middle Initial)						Allocated Activity or Event: <input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address								
City		State		Zip Code				
Purpose of Disbursement:					<div style="border: 1px solid black; padding: 2px;"></div> Category/ Type		Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px;"></div>	
Activity or Event Identifier:							Date <div style="border: 1px solid black; padding: 2px;"></div> / <div style="border: 1px solid black; padding: 2px;"></div> / <div style="border: 1px solid black; padding: 2px;"></div>	
FEDERAL SHARE			+			NONFEDERAL SHARE		
<div style="border: 1px solid black; padding: 2px;"></div>						<div style="border: 1px solid black; padding: 2px;"></div>		
			=			TOTAL AMOUNT		
						<div style="border: 1px solid black; padding: 2px;"></div>		

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<div style="border: 1px solid black; padding: 2px;">4893.71</div>		<div style="border: 1px solid black; padding: 2px;">8699.93</div>		<div style="border: 1px solid black; padding: 2px;">13593.64</div>

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<div style="border: 1px solid black; padding: 2px;">31286.00</div>		<div style="border: 1px solid black; padding: 2px;">55619.60</div>		<div style="border: 1px solid black; padding: 2px;">86905.60</div>